PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1994

Application or Docket Number

08/530661

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | / SMALL ENTITY | | | OTHER THAN OR SMALL ENTITY | |
|---|--|---|-------------------|------------------|-------------------------------------|------------------|-------|-------------------|------------------------|-------------------------|----------------------------|------------------------|
| FOF | ? | 1 | JMBER FILED | | NUMBER EXTRA | |] [| RATE | FEE | | RATE | FEE |
| BAS | IC FEE | | | | <u>.</u> | | | | 365.00 | OR | | 730.00 |
| TOT | AL CLAIMS | 2 | minus 20 = | | • 7 | |] ; | x\$11= | | OR | x\$22= | 154 |
| INDE | PENDENT CL | AIMS | $\frac{1}{2}$ min | us 3 = | • 4 | | | x38= | | OR | x76= | 737 324 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | ┨ ╞ | +120= | | | +240= | <i>507</i> | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | L | TOTAL | | OR | L | 1188 |
| <u> </u> | | | | | | | | | OR | TOTAL | (10.0 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | SMALL ENTITY | | | OR | OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | A- | CLAIMS REMAINING AFTER AMENDMENT | | NI PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | \sim 7 | Minus | "- | 2 7_ | = | | (\$11= | | OR | x\$22= | |
| | Independent | ·) | Minus | *** | \mathcal{I} | = | | x38= | | OR | x76= | |
| 7 | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM | | | | | | | -120= | | OR | +240= | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | TOTAL DIT. FEE | | OR , | TOTAL ADDIT, FEE | |
| MENDMENT B | (b) | CLAIMS REMAINING AFTER AMENDMENT | | NL PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · 2 7 | Minus | | 27 | = | > | (\$11= | | OR | x\$22= | |
| | Independent | •) | Minus | *** | 2. | | | x38= | | OR | x76= | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 120= | | OR | +240= | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | TOTAL DIT. FEE | | OR , | TOTAL ADDIT. FEE | |
| ENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIC NU PRE | GHEST UMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | * | Minus | ** | | = | × | \$11= | | OR | x\$22= | |
| | Independent | * | Minus | *** | | = | | x38= | | OR | x76= | |
| ۷ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +120= | | | | | | | | | OR | +240= | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ADDIT. FEE TOTAL ADIT. FEE TOTAL ADDIT. FEE TOTAL ADIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE | | | | | | | | | | | | |